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135 North Pennsylvania Street
Indianapolis, Indiana 46204

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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group: 3632

Atty. Docket: 8266-0371

Applicants: Metz, et al.

Title: MEDICAL DEVICE
SUPPORT ASSEMBLY

Serial No.: 09/629,524

Filed: August 1, 2000

Examiner: Chan, K.

Certificate Under 37 CFR 1.8(a)

I hereby certify that this paper or fee is being deposited
with the United States Postal Service as first class mail in an
envelope addressed to the Commissioner for Patents,
Washington, D.C. 20231

on April 24, 2002

Mark Shi

Dated: April 24, 2002

RESPONSE TO FIRST OFFICIAL ACTION

Sir:

In response to the Official Action of April 17, 2002, please enter this corrected
response.

In response to the Official Action of September 24, 2001, please amend the above-noted application as indicated below and consider the remarks found herein. Pursuant to 37 C.F.R. §1.121, a version of the claims as amended is submitted herein, and a marked up version showing the amendments to the claims is submitted contemporaneously herewith as ATTACHMENT A.



3632

25267

PATENT TRADEMARK OFFICE

PATENT APPLICATION

Applicant: Metz, et al.

Serial No.: 09/629,524

Filing Date: August 1, 2000

Title: MEDICAL DEVICE SUPPORT ASSEMBLY

Group: 3632 Examiner: K. Chan

Attorney Docket No.: 8266-0371

COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

Dear Sir:

Transmitted herewith is a response in the above-identified application:

The fee has been calculated as shown below:

CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	NUMBER EXTRA	RATE	Fee
TOTAL CLAIMS (37 C.F.R. 1.16(c))	87	87	0	\$18	\$0
INDEPENDENT CLAIMS (37 C.F.R. 1.16(b))	13	13	0	\$84	\$0
If applicant has small entity status under 37 C.F.R. 1.9 and 1.27, then divide total fee by 2, and enter amount here.			SMALL ENTITY TOTAL	NO	\$0
TOTAL FEE FOR ADDITIONAL CLAIMS					\$0

An Extension of Time for _____ month(s) is hereby requested
under 37 C.F.R. 1.136(a). The required fee for filing this extension is: _____

Information Disclosure Statement _____

TOTAL FEE FOR THIS AMENDMENT _____ \$0

A check in the amount of \$_____ to cover the total fee for this
amendment is attached.The Commissioner is hereby authorized to charge any additional filing fees under 37 C.F.R. 1.16 or processing fees
under 37 C.F.R. 1.17 which may be required during the prosecution of this application, or credit of any overpayment,
to Bose McKinney & Evans LLP's Deposit Account No. 02-3223. A duplicate copy of this sheet is enclosed.

Attorney of Record

Printed Name: Ryan C. Barker

Registration No.: 47,405

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105 N RTH PENNSYLVANIA STREET
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Certificate Under 37 C.F.R. 1.8(a)

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20231.

On April 24, 2002

D. Cwiklinski

Dated: April 24, 2002

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